June 2003

UTAH STATE OFFICE OF REHABILITATION

and the

DIVISION OF SERVICES FOR THE DEAF AND HARD OF HEARING

Annual Interpreter Recognition Form - RID/NAD Certified Interpreters PLEASE PRINT

Nama	(PLEASE CIRCLE)
Name	Type of Certificate
Address	NEW? Y N CI
	Certificate of Interpreting
City, State, Zip	
	CLIP
Home Phone Work/ce	II Phone Conditional Legal Interpreting Permit
5	CLID D
Birthdate / / E-mail address	CLIP-R Conditional Legal Interpreting
montal day year	Permit - Relay
Are you currently certified in another state? NO	CDI-P YES State Certified Deaf Interpreter -
Are you currently certified in another state: 140	Provisional
tion!	CDI
New Information! PLEASE READ CA	REFULLY.
New	CSC Comprehensive Skills Certificate
	RSC
While not required to hold Utah certification, interpreters who possess RID/NAD certifi-	
cates must be recognized by the State of Utah before being able to interpret in this state.	
This approval must be obtained annually, by completing and returning this form with	
This approval must be obtained annually, by completing and returning this form with the \$30.00 recognition fee. Please attach a copy of your current RID/NAD certificate.	
The Division of Services for the Deaf and Hard of Hearing (DSDHH) and the Utah Interpreter Program maintains a state information system on all certified interpreters and transliterators. DSDHH publishes and provides such information to national, state and local governmental bodies and other public and private employers who seek certified interpreters/transliterators. Your permission is required to publish your name, certification level, and telephone number in the Utah Certified Interpreter List, and to share same as part of its regular information sharing on certified interpreters and transliterators. YES, you may publish my name and contact information in the Utah Certified Interpreter List / UIP website. NO. Do not publish my contact information.	
Interpreter Signature	Date
For Division Use Only	Return form and payment to
Approved	Utah Interpreter Program
7.5010104	5709 South 1500 West
Director, Utah Interpreter Program	Taylorsville UT 84123-5217
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Reviewed by _____

Paid .

Date received _____